December 26, 2005

Mail Stop 16
Director of the USPTO
PO Box 1450
Alexandria, VA 22313-1450

Refund to account: 503642

Dear Sir or Madam:

I am writing to request a refund of $125.00 that was paid by mistake in association with one of our pending patent applications, 09/761,670.

As shown in attachment A and attachment B, 42 claims and 3 independent claims were paid for at the time the application was filed. A recent amendment pushed that total to 43 claims with 5 independent claims (see attachment C). As a result of this change, $225.00 should have been charged to our deposit account ($200 for two additional independent claims and $25 for one additional claim). As shown in attachment D, our account was charged $350.00 in November for the changes related to 09/761,670 – an overpayment of $125.00.

Please refund the overpayment of $125.00 to account 503642 as soon as possible. Thank you.

Respectfully submitted,

B.J. Bennett, President, Asset Reliance, Inc.

Adjustment date: 01/19/2006 SFELEKE1
11/28/2005 DBATES   00000002 503642   09761670
01 FC:2202   150.00 CR

01/19/2006 SFELEKE1 00000002 503642   09761670

01 FC:2202   25.00 DA

Attachment A

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/761,670	01/18/2001	2163	553		17	42	3

CONFIRMATION NO. 5377

UPDATED FILING RECEIPT

OC000000008530445

Jeff Eder
19108 30th Drive SE
Mill Creek, WA 98012

Date Mailed: 09/07/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Jeffrey Scott Eder, Mill Creek, WA;

Domestic Priority data as claimed by applicant

THIS APPLICATION IS A CIP OF 08/779,109 01/06/1997
AND A CIP OF 08/539,020 10/03/1995 ABN

Foreign Applications

If Required, Foreign Filing License Granted 05/21/2001

Projected Publication Date: 12/20/2001

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Method of and system for evaluating cash flow and elements of a business enterprise

Preliminary Class

705

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000	Application or Docket Number 09761670

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	42	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	42 minus 20=	* 22
INDEPENDENT CLAIMS	3 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X$ 9=	198	OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL	553	OR	TOTAL	

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 42	Minus	** 42	=
Independent	* 1	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

09/761670

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	150.00	OR	BASIC FEE	300.00
X$ 25=		OR	X$50=	
X100=		OR	X200=	
+160=		OR	+360=	
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED - PART II

AMENDMENT A 11/11/5

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	43	Minus	37	6
Independent	5	Minus	3	2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

pt #100

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 25=	150	OR	X$50=	
X100=	200	OR	X200=	
+180=		OR	+380=	
TOTAL ADDIT. FEE	350	OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 25=		OR	X$50=	
X100=		OR	X200=	
+180=		OR	+360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 25=		OR	X$50=	
X100=		OR	X200=	
+160=		OR	+360=	

Attachment D

United States Patent and Trademark Office

Return To:

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Home
Page

Finance
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Page

Deposit Account Statement

Requested Statement Month:	November 2005
Deposit Account Number:	503642
Name:	ASSET RELIANCE, INC.
Attention:	B J BENNETT
Address:	2020 MALTBY ROAD
City:	BOTHELL
State:	WA
Zip:	98021
Country:	UNITED STATES OF AMERICA

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
11/01	60	10821504	VM-65	2201	$200.00	$1,900.00
11/01	61	10821504	VM-65	2202	$400.00	$1,500.00
11/15	18	09761670	AR-10	2201	$100.00	$1,400.00
11/15	136	10282113	VM-37	1806	$180.00	$1,220.00
11/22	2	09761670	AR-10	2202	$150.00	$1,070.00
11/22	3	09761670	AR-10	2201	$100.00	$970.00

START BALANCE	SUM OF CHARGES	SUM OF REPLENISH	END BALANCE
$2,100.00	$1,130.00	$.00	$970.00

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Method of Refund:

☐ **ACH/EFT**

☐ **Credit Card**

☒ **Deposit Account #** 503642

☐ **Treasury Check**

Patent/TM/App/Serial # 09/761,670

Program Area Tech Center 3629

Date Processed 1/9/2006